

Statement of Deficiencies

1723-A.&B.: CPR Certification

Not Met

1723-A.&B.: Infant and child CPR

Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in infant and child CPR.

Adult CPR

Centers shall have at least one staff member on the premises and accessible to children trained in Adult CPR if there is a child eight years or older on the premises.

Finding:

1723 A & B CPR Certification: There was no documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in adult, infant and child CPR. Two of ten staff, S1 and S3 had documentation of this certification. A class was scheduled for 3/29/18, but was canceled and rescheduled for 4/2/18.

1723-C.-D.: Pediatric First Aid

Not Met

1723-C.-D.: C. Pediatric First Aid - Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in Pediatric First Aid.

D. Certification - A copy of the certification for each such staff member shall be on-site at all times and available for inspection by the Licensing Division.

Finding:

1723-C.-D. Based on record review: After July 1, 2016 - There was no documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in Pediatric First Aid. Two of ten staff, S1 and S3 had documentation of this certification. A class was scheduled for 3/29/18, but was canceled and rescheduled for 4/2/18.

1725-A.-E.: Medication Management Training

Not Met

1725-A.-E.: A. All staff members who administer medication shall have medication administration training.

B. Whether administering medication or not, each early learning center shall have at least two staff members trained in medication administration.

C. Such training shall be completed every two years with an approved Child Care Health Consultant.

D. A licensed practical nurse (LPN) or registered nurse (RN) with a valid nursing license shall be considered to have medication administration training.

Finding:

1725 A-E medication Management Training: After July 1, 2016, there was no documentation that at least two staff members were trained in medication administration whether the early learning center administers medication or not. The center does not administer medication. S1 and S8's medication administration training expired in August 2017.

1917-A: Medication Authorization

Not Met

1917-A: Written Authorization. No medication or special medical procedure shall be administered to a child unless authorized in writing by the parent. Such authorization shall include:

1. name of child;
2. drug name and strength;
3. date(s) to be administered;
4. directions for use, including the route (oral, topical), dosage, frequency, time and schedule and special instructions, if any. It is not acceptable to note "as indicated on bottle"; and
5. signature of parent and date of signature.

Finding:

1917-A Based on record review:

The provider did not obtain written authorization from the parent to administer medication to a child. The center had an Epi Pen for C5 with no authorization for its use.

Statement of Deficiencies

1917-K: Emergency Medication Plan and Records

Not Met

1917-K: Emergency Medications

1. Children who require emergency medications, such as an EpiPen or Benadryl, shall have a written plan of action that shall be updated as changes occur or at least every six months, and shall include:

- a. method of administration;
- b. symptoms that indicate the need for the medication;
- c. actions to take once symptoms occur;
- d. description of how to use the medication; and e. signature of parent and date of signature.

2. Medication administration records for emergency medication shall be maintained and include the following:

- a. symptoms that indicated the need for the medication;
- b. actions taken once symptoms occurred;
- c. description of how medication was administered;
- d. signature of administering staff member; and
- e. phone contact with the parent after administering emergency medication.

Finding:

1917-K Based on record review: A child who requires emergency medications, such as an EpiPen or Benadryl, did not have a written plan of action as evidence by an Epi Pen for C5. The center has on hand an Epi Pen for C5 and does not have a written plan of action for its use.
